

OCTOBER 2004

Insight

For
benefits
administrators

More details on prescription drug coverage under the new State Health Plan Savings Plan[®]

The Employee Insurance Program (EIP) has received many questions regarding the prescription drug coverage under the new State Health Plan Savings Plan. The following is information on how prescription drug coverage will work.

You pay the total cost, up front.

When you purchase a prescription drug at a retail pharmacy or through Medco's mail-order pharmacy, you will pay 100 percent of the Savings Plan's total, allowable cost for the drug. Be aware that after you have met your deductible under the Savings Plan, you will continue to pay 100 percent of the Plan's allowable cost for a drug. The plan will then reimburse you by check for any benefit due.

Once you have met your deductible, coinsurance applies.

Once you have met your deductible: \$3,000 for single coverage, \$6,000 for family coverage (you and one or more family members are covered), the plan will begin to pay 80 percent of the allowable cost for the prescription drug.

Purchasing a brand name when a generic is available

If your doctor prescribes, or you request, a brand-name drug and there is an

equivalent generic drug available, only the plan's allowable cost for the generic drug will apply toward your deductible. After you have met your deductible, your coinsurance for the cost of the generic drug will apply toward your coinsurance maximum. This policy will apply, even if the doctor prescribes the medication as "Dispense as Written" or "Do Not Substitute."

Here is an example (price may vary).
Prilosec, 10mg capsule (brand-name), costs \$107.42. A generic equivalent, Omeprazole, costs \$85.82. If you purchase the Prilosec instead of Omeprazole, you pay \$107.42, and \$85.82 will apply toward your deductible, if you have *not* met your deductible. If you *have* met your deductible, 20 percent of that \$85.82, or \$17.16, will apply or toward your coinsurance maximum.

A few prescription drugs not covered

In addition to the drugs not covered under the Standard Plan, the Savings Plan does not cover non-sedating antihistamines or drugs for erectile dysfunction. You pay the retail price for these drugs at a pharmacy, and the cost will not apply toward the deductible or the coinsurance maximum.

Have a question?

Visit the EIP Web site at www.eip.sc.gov. Look under "FAQ" or

"News & Updates" for a list of frequently asked questions on the new Savings Plan and the Health Savings Account associated with it. You may also call EIP at 803-734-0678 (Greater Columbia area) or 888-260-9430 (toll-free outside the Columbia area). Other Web resources can be found at www.irs.gov and www.hsain insider.com.

Savings Plan and Health Savings Account FAQ online[®]

Have questions about the new State Health Plan Savings Plan or the new MoneyPlus Health Savings Account? Visit the EIP Web site at www.eip.sc.gov to learn more! Once on our site, go to "News & Updates" or "FAQ."

There you'll find a list of frequently asked questions (FAQ), which will be updated as additional information becomes available about the new plans offered for 2005. If you do not have Internet access, call EIP at 803-734-0678 (Greater Columbia area) or 888-260-9430 (toll-free outside the Columbia area). A Subscriber Services representative will be happy to assist you.

Optional Life Reminder!

Your employees can add up to \$30,000 of Optional Life Insurance coverage this annual enrollment period without medical evidence of good health.

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The latest update on the MoneyPlu\$ materials for 2005

Revised forms

By now you should have received your **2005 MoneyPlu\$ enrollment forms and Health Savings Account flyers.**

- You and your employees can also access the new form on the EIP Web site at www.eip.sc.gov. Choose your category, and then select "forms." Note it is now a legal-size form (8 1/2" x 14"). The 2004 enrollment form will be on the Web site until January 1 for any employees whom you may hire between now and then.
- To access the flyer, select "publications." Make additional copies as needed.

If you do not have Internet access and you need additional forms and flyers, call FBMC at 800-872-0345.

- FBMC also sent to all BAs **instructions for completing the new enrollment form.** The instructions were sent separately from the forms. *Read these instructions carefully!* These instructions are also on the EIP Web site for your convenience. Choose your category, then select "Enrollment, Training, and Special Events." A link to the instructions is there, along with other annual enrollment information.
- **The Deposit of MoneyPlu\$ Contributions form** has been revised for 2005. The new form is on the EIP Web site. You will need to log in to the secure area of the Web site to access this new form. If you do not have Internet access, call FBMC at the number above to request this form.

2005 MoneyPlu\$ booklet

This booklet is being printed, and FBMC will be sending a supply to you soon. It is available on the EIP Web site. Choose your category, then select, "Publications."

Pharmacy list

For those considering the EZ REIMBURSE® MasterCard® Card that can be used with a full Medical Spending Account, a **list of participating pharmacies** is available on the EIP Web site, under "News & Updates."

- The list will be updated periodically and will remain on the site until January 1,

2005. Beginning January 1, Medical Spending Account participants will be able to access the list directly on Fringe Benefits Management Company's Web site at www.f BMC-benefits.com when they log on as registered users.

- Employees who are currently enrolled in a Medical Spending Account for 2004 can also look up participating pharmacies when they log on as registered users.
- Employees without Internet access can call FBMC at 800-342-8017 to locate a participating pharmacy.

As a reminder

A list of **NBSC branch locations** in South Carolina is posted on the EIP Web site. Choose your category, then select "Online Directories." Those who enroll in the new Savings Plan and who also enroll in the new MoneyPlu\$ Health Savings Account may want to locate a nearby branch office. NBSC will serve as the custodian for these accounts.

Attention BAs!

Please send FBMC your MoneyPlu\$ enrollment forms as they are completed. Do not hold them.

SHP Savings Plan includes free annual physical¹

The SHP Savings Plan includes an annual physical for the subscriber and for covered family members, age 13 and older. This physical must be given by a participating provider



with the State Health Plan. You should not pay anything; the physician will file the paperwork and will be paid directly by the Plan. Be sure to confirm your plan coverage and the physical coverage with your provider when you schedule your appointment.

Here's what the physical covers:

- A preventive, comprehensive examination
- A complete urinalysis
- An electrocardiogram (EKG)
- A fecal occult blood test
- A general health laboratory panel "bloodwork"
- A pap smear

Every five years you can also receive a lipid panel with your annual physical.

Consult the Internet or your medical provider for additional information regarding these medical terms and their meanings.

MUSC Options to implement prescription drug coordination of benefits for 2005¹

Medco is the third-party administrator for the prescription drug programs under the State Health Plan as well as MUSC Options, and effective January 1, 2005, MUSC Options will begin coordinating benefits for its prescription drug coverage. This coordination will entail the procedures below.

When you are covered by more than one plan, the plan that pays first is the primary plan. The secondary plan pays after the primary plan. MUSC Options determines which plan is primary. Here are some examples of how that works:

- The plan that covers a person as an employee is primary to the plan that covers the person as a dependent.
- When both parents cover a dependent

child, the plan of the parent whose birthday comes earlier in the year is considered primary.

When filling a prescription at a participating pharmacy, you may notice a difference in the amount MUSC Options pays based on the coordination.

If MUSC Options is primary

When you fill a prescription, present your MUSC Options insurance card first. Your claim will be processed under the plan as if you had no other coverage. Then present the card for your secondary insurance coverage. If the pharmacy can pay secondary insurance claims electronically, benefits under that plan will be paid.

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Great resources for SHP Savings Plan subscribers! ①

24-hour nurseline and self-care guide: free to enrollees

State Health Plan (SHP) Savings Plan subscribers will have two powerful tools to help them seek answers to their healthcare questions, feel more confident about their decisions and better manage their health.

Nurseline

Health at Home® Nurseline is a toll-free, 24-hour, help line. Registered nurses (RNs) provide one-on-one, personal assistance to subscribers, giving callers immediate health information and advice on nearly any condition or health situation that may arise. These nurses make follow-up calls when necessary, anytime of the day or night.

Here are some of the benefits of using the Health at Home® Nurseline (Nurseline):

- You receive quick and immediate answers to your questions, provided by trained medical professionals.
- You'll receive one-on-one counseling.
- Through the Nurseline, you are better prepared to take a more active role in your healthcare and can make more informed decisions.
- If the call is an emergency, the nurse will transfer the caller to 911 immediately and will remain on the line until the call has been connected; longer, if necessary, to provide assistance until rescue personnel arrive.
- Nurses make follow-up calls within 24-48 hours of emergency calls to check on your status. These calls are to answer any additional questions you may have and to make sure the necessary steps have been taken to get medical care.

In addition to one-on-one counseling, you also have access to an audiotape library on more than 400 health topics. Anytime during one of these audio messages, you can access a Nurseline counselor to discuss the information you just heard and to ask questions.

Self-care guide

In January 2005, a copy of **Health at Home®—Your Complete Guide to Symptoms, Solutions & Self-Care (Guide)** will be mailed to all Savings Plan subscribers. One of the most popular and up-to-date health information guides in the country, this book covers more than 200 health topics in an easy-to-read, step-by-step format. The Guide contains more than 416 full-color pages of informative information on almost any health condition you can think of.

In the Health at Home® Guide, you'll find up-to-date information on:

- Common and not-so-common health conditions, such as sinus problems, skin rashes, insect bites, insomnia, anemia, repetitive motion injury and many more
- Consumer health education on the doctor/patient relationship
- Medications, both prescription and over-the-counter
- Medical exams and tests, what kinds and why they're important
- Making medical decisions, including flow charts and checklists
- Using the healthcare system wisely
- Dental health
- Health issues specific to women, men and children
- Medical emergencies
- Chronic diseases

Take advantage

Beginning in January, you will have two powerful healthcare tools at your fingertips—for free! The Health at Home® Guide and Nurseline are available *only to those enrolled in SHP Savings Plan*. The Employee Insurance Program encourages you to take advantage of these great tools, designed to help you make more informed healthcare decisions.

Medco to make temporary Web sites available ①

Medco is working quickly to make available three, temporary Web sites so subscribers can look up prescription drug costs and benefits for 2005 for:

- The State Health Plan Standard Plan
- The State Health Plan Savings Plan
- MUSC Options

On these three Web sites, you will be able to:

- Look up a brief summary of prescription drug coverage under the plan, for retail and mail-service pharmacy benefits
- Compare and price different drugs and generic equivalents (prices subject to change)
- Locate a participating pharmacy

These Web sites will allow you to look up information between now and January 1, after which time you will have your own individual access and logon capabilities to the regular Medco Web site. The EIP will notify your benefits administrator as soon as these sites are up and running.

Until then, Medco's customer service representatives should be able to answer prescription drug coverage questions and look up costs (prices subject to change) for these plans. The toll-free number is 800-711-3450.

Notice to BAs of agencies in the Comptroller General payroll group

The Comptroller General's Office has assigned **payroll deduction code 460** for contributions to Health Savings Accounts associated with the new State Health Plan Savings Plan. Code 460 is defined as "Health Savings Account" and is for use only by those state agencies whose payrolls are administered by the Comptroller General's Office.

Deductions under this new code may first occur on January 1, 2005, paychecks. These deductions are for pretax contributions to Health Savings Accounts through Fringe Benefits Management Company, with NBSC as trustee for the accounts.

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Services to help you make the most of your CIGNA HealthCare benefits

CIGNA HealthCare places great importance on member education. During this busy time, CIGNA will send current members a two-sided postcard notifying them of the many services they have as a CIGNA HealthCare member.

Periodically, CIGNA will send member mailings to educate enrollees of the value-added services of their CIGNA HealthCare plan. If, at any time, you have any questions about the 2005 CIGNA HealthCare plan offering or anything CIGNA has mailed to your employees who participate in the CIGNA HealthCare plan, call 800-564-7624 or e-mail them at scbenefitmanager@CIGNA.com.

MUSC Options coordination of benefits

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If MUSC Options is secondary

Please present the card for your primary coverage first. If you present your MUSC Options card first, the claim will be rejected initially because MUSC Options is secondary. After the pharmacy processes the claim through your primary coverage, it will be processed through MUSC Options.

If the pharmacy cannot process secondary insurance claims electronically, you will need to file a paper claim to Medco for any MUSC Options benefits. Prescription drug claim forms are available on the EIP Web site at www.eip.sc.gov. Choose your category and then select "Forms." You'll see both the retail and pharmacy mail service/home delivery forms listed.

Please remember: MUSC Options is not responsible for filing or processing claims for a subscriber through another health insurance plan. That is your responsibility.

Insight

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